PAGE 1 / 15

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X F	or Other Than	An Authorized	I Committee			Office Use Only	
1. NAME OF TOOMMITTEE (in full)	TYPE OR PRINT ▼	LAG	mple: If typing, tyr the lines.	ype	12FE4M	5	
STATE CONSERVATIV	/E REFORM	ACTION PAGE	C (SCRAP)				
ADDRESS (number and street)	10532 ASHBURN	I RD					
Check if different than previously reported. (ACC)	NORTH CHESTE	ERFIELD			VA L	23235	-
2. FEC IDENTIFICATION NUI	MBER ▼	CITY ▲		S	TATE A	ZIP CO	DE 🛦
C C00566372		3. IS THIS REPORT	NEW (N)	OR	AM (A)	IENDED	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1 X July 15 Quarterly Report (Q2 October 15 Quarterly Report (Q3 January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(c) 12-Day PRE-EI Report (d) 30-Day POST-I	ection for the:	Jun 2		Sep	in the	Special (30S)
5. Covering Period 04	01	2018	through	M = M 06	/ 30 /	2018	
I certify that I have examined this Type or Print Name of Treasurer	s Report and to th Marston, Chris, ,		wledge and belief	f it is true	e, correct and	I complete.	
Signature of Treasurer Marsto	on, Chris, , ,		[Electronically File	<u>d]</u> Da	ate 07	17 /	2018
NOTE: Submission of false, erroned	ous, or incomplete	information may su	bject the person s	signing thi	s Report to th	e penalties of 52	U.S.C. § 30109
Office Use Only						FEC FOR Rev. 05/2	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)
Page 2

Write or Type Committee Name

STATE CONSERVATIVE REFORM ACTION PAC (SCRAP)

01 2018 06 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 11550.35 January 1, 2018 (b) Cash on Hand at 11105.59 Beginning of Reporting Period..... 17000.00 17000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 28550.35 28105.59 6(a) and 6(c) for Column B)..... 18202.30 18647.06 7. Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 9903.29 9903.29 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 20095.60 Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

STATE CONSERVATIVE REFORM ACTION PAC (SCRAP)

R	eport Covering the Period: From:		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	2000.00	2000.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	2000.00	2000.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	15000.00	15000.00
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	17000.00	17000.00
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	17000.00	17000.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	17000.00	17000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
Operating Expenditures: (a) Allocated Federal/Non-Federal		Calonida Tour to Date				
Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating	7 7	4 4				
Expenditures	4298.74	4311.74				
(c) Total Operating Expenditures						
(add 21(a)(i), (a)(ii), and (b))▶	4298.74	4311.74				
Transfers to Affiliated/Other Party Committees	0.00	0.00				
Contributions to	4 4					
Federal Candidates/Committees and Other Political Committees	0.00	0.00				
Independent Expenditures	4 4	4 4 4				
(use Schedule E) Coordinated Party Expenditures	13903.56	14335.32				
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00				
(222 23104410 1)	4 4	0.00				
Loan Repayments Made	0.00	0.00				
	4 4					
Loans Made Refunds of Contributions To:	0.00	0.00				
(a) Individuals/Persons Other Than Political Committees	0.00	0.00				
man i ontical committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	4 4	4 4				
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))	0.00	0.00				
Other Disbursements (Including						
Non-Federal Donations)	0.00	0.00				
	4 4	45 45				
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity	20))					
(from Schedule H6)						
(i) Federal Share	0.00	0.00				
.,						
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid	7 7 7	7 7 7				
Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00				
Emos 60(a)(i), 60(a)(ii) and 60(b))	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	18202.30	18647.06				
	10202.00	7 7 7				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	18202.30	18647.06				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	17000.00	17000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17000.00	17000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4298.74	4311.74
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	4298.74	4311.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

I TOTT EITHE TOTTIBLETT.					PAGE	=	6	OF	15		
	(check only one)										
		×	11a		11b		11c		12	2	
			13		14		15		16	6	17

	for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) STATE CONSERVATIVE REFO		ION PAC (SCRAD)						
Α.	Full Name of Individual (Last, First, Middle Initial Spitzer, Terry, , ,	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address 3850 Littleneck Point Rd			06 17 2018					
	City	State	Zip Code	Transaction ID : SA11AI.4322					
	Virginia Beach	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		2000.00					
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item					
	Global Technical Systems, Inc.	Exe	cutive						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		2000.00						
			4-1-4-1-4-1-						
_	Full Name of Individual (Last, First, Middle Initial	al) or Full O	rganization Name						
B.	Mailing Address			Date of Receipt					
	City	State	Zip Code	Amount of Each Descire this Desired					
	FEC ID number of contributing	_		Amount of Each Receipt this Period					
	federal political committee.	C							
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General								
	Other (specify) ▼		4 4 4						
С .	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name	Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		7 tillodrit of Each Floodipt tillo Follod					
	federal political committee.								
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Other (specify) General								
	Other (specify)								
				2000.00					
8	SUBTOTAL of Receipts This Page (optional)		>	2000.00					
1	OTAL This Period (last page this line number of	only)		2000.00					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Name of Employer (for Individual)

General

Receipt For:

Primary

Other (specify)

15 FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11c 11b 11a 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) STATE CONSERVATIVE REFORM ACTION PAC (SCRAP) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SPECIAL OPERATIONS FOR AMERICA Date of Receipt Mailing Address PO BOX 3245 05 2018 City Zip Code State Transaction ID: SA11C.4343 NY SARATOGA SPRINGS 12866 Amount of Each Receipt this Period FEC ID number of contributing C00523241 15000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 15000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee.

Occupation (for Individual)

Aggregate Year-to-Date ▼

Memo Item

S	CHEDULE B (FEC Form 3X)			R I INF	E NUMBER: PAGE 8 OF 15							
	EMIZED DISBURSEMENTS	Use separate schedule(s) (check			(check only one)							
-			Summary Page		X 21b		23	26		27		
					28a		28c	29		30b		
	ly information copied from such Reports and Stater for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full)		- , ,									
$ \rangle$	STATE CONSERVATIVE REFORM	M ACTIC	ON PAC (SO	CRAP)							
_	Full Name (Last, First, Middle Initial)											
Α.	First Citizens Bank			Date of Disbursement								
	Mailing Address PO Box 27131					06 18 2018						
	City Saleigh	State NC	Zip Code 27611			FEC Identification Number						
	Purpose of Disbursement			_	-	С				п.		
	Bank Fee					saction I	ID : SE	321B.4	1328			
	Candidate Name				of Each I	_			eriod			
	Office Sought: House Disburser	ment For:		1 L.:.	- T			50.00	Ш			
	Senate President	Primary Other (spec	General				,					
	State: District:	Other (spec	.iiy) ▼			Mem	o Item					
	Full Name (Last, First, Middle Initial)											
B.	First Citizens Bank			Date of Disbursement								
	Mailing Address PO Box 27131			06 29 2018								
	City :	Zip Code 27611			FEC Identification Number							
	Purpose of Disbursement	_	C		-		1					
	Bank Fee					321B.4	1329					
	Candidate Name			Amount of Each Disbursement this Period								
	Office Sought: House Disburser	ment For:	nent For:				5.00					
	Senate	Primary	General									
	President State: District:	Other (spec	ify)			Memo Item						
_	Full Name (Last, First, Middle Initial)											
C.	North Rock Reports					Date of	Disburser	ment				
	Mailing Address 45 N Hill Dr Ste 100					06	11			2018		
	City	State	Zip Code			FEC Ido	ntification	Numh	ner			
	Warrenton Purpose of Disbursement	VA	20186							-		
	Compliance Consulting					C		ID 05	2045	1000		
	Candidate Name	Categ			saction of Each I				eriod			
	Office Sought: House Disburser	ment For:		Тур	е					2500.00		
	Senate	Primary	General				7			- 4		
President Other (specify) ▼						Mem	o Item					
State: District:												
s	UBTOTAL of Disbursements This Page (optional)				···· >		<u></u>			2555.00		
Т	OTAL This Period (last page this line number only))			▶		, .		, .			

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 O								
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check or	,							
		Summary Page	211		23 28c	26 27 29 30b					
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NAME OF COMMITTEE (In Full)											
angle STATE CONSERVATIVE REFOR	M ACTI	ON PAC (SC	CRAP)								
Full Name (Last, First, Middle Initial)											
A. RoboCent, Inc.				Date of	Disbursen	nent					
				M M	/ D C						
Mailing Address 2129 General Booth Blvd Ste 103-277				06	04	2018					
City	State	Zip Code		FEC Identification Number							
Virgnia Beach	VA	23454			tilleation	Number					
Purpose of Disbursement List Acquisition, Telecom Set-up, Pre-Paymnet of	Es			C							
Candidate Name			0-1			D: SB21B.4335 Disbursement this Period					
	Category Type										
Office Sought: House Disburse	Office Sought: House Disbursement For:										
Senate				,							
State: District:	Other (spe	ecity) 🔻		Mem	no Item						
Full Name (Last, First, Middle Initial)											
B. RoboCent, Inc.				Date of	Disbursen	nent					
		/ 06									
Mailing Address 2129 General Booth Blvd Ste 103-277	Ste 103-277										
City Virgnia Beach						Number					
Purpose of Disbursement		C									
Debit to Pay for IEs on Line 24				Transaction ID : SB21B.4339							
Candidate Name			Category/	Amount of Each Disbursement this Perio							
Office Sought: House Disburse	ment For:		Type								
Senate	Primary	General									
President	Other (spe	ecify)		Memo Item							
State: District:											
Full Name (Last, First, Middle Initial) C. RoboCent, Inc.				Date of	Disbursen	nent					
Mailing Address 2129 General Booth Blvd				06	07						
Ste 103-277				00	Ü	2010					
City	State	Zip Code		FEC Ide	ntification	Number					
Virgnia Beach Purpose of Disbursement	VA	23454									
Debit to Pay for IEs on Line 24	C	a a a ti a u I	D : SB21B.4340								
Candidate Name	1		Disbursement this Period								
			2200.00								
Office Sought: House Disburse Senate				- 3390.20							
President	Primary Other (spe	General ecify) ▼		П.,							
State: District:	Mem	no Item									
· ·											
SUBTOTAL of Disbursements This Page (optional).			······································			- 1341.46					
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S	CHEDULE B (FEC Form 3X)		EOD I INE					NUMBER: PAGE 10 OF 15							
	EMIZED DISBURSEMENTS		arate schedule(s)		heck	only			_	_	_				
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	ly information copied from such Reports and State for commercial purposes, other than using the national states.														
	NAME OF COMMITTEE (In Full)														
$ \rangle$	STATE CONSERVATIVE REFOR	M ACTIO	ON PAC (SO	CRAF	2)										
\angle	Full Name (Last, First, Middle Initial)														
Α.	RoboCent, Inc.						Date	of D	isburs	eme	ent				
							M	M	/ D	D	/ Y	I Y	Y		
	Mailing Address 2129 General Booth Blvd								06 08 2018						
	Ste 103-277	State	ate Zip Code												
	Virgnia Beach	VA	23454				FEC Identification Number								
	Purpose of Disbursement				-	\neg	С								
	Pre-Payment of IEs Candidate Name			L							: SB21				
	Candidate Name			Cate	egory ype	y/	Amo	unt o	f Each	Dis	sbursen	nent	this Pe	eriod	
	Office Sought: House Disburse	ment For:		' '	, ۲۰	\dashv						6	000.00		
	Senate	Primary	General						7		7				
	President Other (specify) ▼								ltem						
_	State: District: Full Name (Last, First, Middle Initial)	-													
В.	RoboCent, Inc.		Date	of D	isburs	eme	ent								
-								M - M / D - D / Y - Y - Y - Y							
	Mailing Address 2129 General Booth Blvd Ste 103-277						06 08 2018								
	City	State	·					FEC Identification Number							
	Virgnia Beach Purpose of Disbursement	VA	VA 23454												
	Debit to Pay for IEs on Line 24						Transaction ID : SB21B.4341 Amount of Each Disbursement this Period								
	Candidate Name			Cate		y/									
	Office Sought: House Disburse	ment For:		Ту	/pe		- 3448.92								
	Senate Dispurse	Primary	General				- 3446.92							_	
	President	Other (spec	cify)				Memo Item								
	State: District:						Ш								
C	Full Name (Last, First, Middle Initial)						Date	of D	isburs	eme	ent				
J .	RoboCent, Inc.						М	M.		D	/ TY	II Y	- Y - Y		
	Mailing Address 2129 General Booth Blvd Ste 103-277						0	6		11	ľ	20			
		State	Zip Code				FEC	Iden	tificatio	on N	lumber				
	Virgnia Beach Purpose of Disbursement	VA	23454									-			
	Debit to Pay for IEs on Line 24			Г.		\Box	С	Tur		. 15	. 0201				
	Candidate Name Category/										: SB21 sbursen			eriod	
	0.5				/pe			_	_		-	_	640.40		
Office Sought: House Disbursement For: Senate Primary General									7	_	7	-2	613.18		
	President Other (specify) ▼							\	. 14						
_	State: District:			Memo Item											
Ĺ	IIRTOTAL of Dishursements This Daga (entional)										-	-	- 62.10		
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SCHEDULE B		FOR LINE					NUMBER: PAGE 11 OF 15						
ITEMIZED DISB	URSEMENTS		arate schedule(s) category of the	(che	eck only	one)			_				
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	from such Reports and State ses, other than using the na												
NAME OF COMMITT	EE (In Full)												
STATE CONS	ERVATIVE REFOR	M ACTIO	ON PAC (SO	CRAP)								
Full Name (Last, Firs						Data	-4 D:-1	م مساما					
A. RoboCent, Inc				Date of Disbursement									
Mailing Address 2129	9 General Booth Blvd					06	/	18	- 1		2018	Y	
	103-277		T						_				
City Virgnia Beach		State VA	Zip Code 23454			FEC Id	dentifi	cation	ı Nu	mber			
Purpose of Disburser	nent		20101	-	-	С							
Pre-Payment of IEs					.		ansa	ction	ID:	SB21B	.4337		
Candidate Name				Categ						-	ent this P	eriod	
Office Sought:	House Disburse	ement For:		Тур	oe						2893.00	0	
omos coagni.	Senate	Primary	General						_	7	1 765		
	cify) 🔻			М	emo I	ltem							
State: Di	strict:		ш										
Full Name (Last, Firs	t, Middle Initial)					Data	4 D:-I						
Б.						Date of Disbursement						V	
Mailing Address						IVI = IV	" '	"	D	/ Y =	7 - 7 -	Y	
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City		State	State Zip Code					FEC Identification Number					
Purpose of Disburser	nent							C					
			Category/				Amount of Each Disbursement this Period						
Candidate Name													
Office Sought:	House Disburse	ement For:	Type										
Office Cought.	Senate	Primary	General			7 7 7						_	
	President	Other (spec	cify)			NA.	emo I	ltam					
State: Dis	strict:					IVI	enio i	item					
Full Name (Last, Firs	t, Middle Initial)					Data	. (D:-I	l					
C.						Date of			_		Y		
Mailing Address						M = N	" '	D	D	/ 1	Y = Y =	Y	
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City		State	Zip Code			FEC I	dentifi	cation	ı Nu	mber			
Purpose of Disburser	nent				-	С							
					_	_	_						
Candidate Name			Categ		Amount of Each Disbursement this Period								
Office Sought:	Тур) U											
						_	7	1 /40					
	Senate Primary General President Other (specify) ▼						emo I	Item					
State: District:													
CURTOTAL of Dist	omento This Dans (autis) 15								_		2893.0		
SUBTUTAL OF DISDUIS	ements This Page (optional).				···· >	-	+		\Rightarrow	7		-	
TOTAL This Period (las	st page this line number only	/)			▶			,			4044.4	4	

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Full Name (Last First Middle Initial) of Debtor or Creditor

2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)

ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

Nature of Dobt (Purpose)

PAGE 12 (FOR LINE NUMBER: (check only one)

	9
X	10

15

OF

NAME OF COMMITTEE (In Full) STATE CONSERVATIVE REFORM ACTION PAC (SCRAP) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services Holtzman Vogel Josefiak PLLC Mailing Address 45 N Hill Dr Ste 100 City State Zip Code Warrenton VA 20186 Transaction ID: SD10.4193 Outstanding Balance Beginning This Period 10595.60 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10595.60 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Compliance Consulting North Rock Reports Mailing Address 45 N Hill Dr Ste 100 City State Zip Code Warrenton 20186 VA Outstanding Balance Beginning This Period Transaction ID: SD10.4189 12000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2500.00 9500.00 0.00

C. I dii Name (Last, I list, Middle lilital) of Debtor		Nature of Debt (Fulpose).	
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period	-		
Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period
SUBTOTALS This Period This Page (optional)			20095.60

20095.60

20095.60

0.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 15 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
STATE CONSERVATIVE REFORM A		C C00566372			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee	Item Dat	e of Public Distribution/Dissemination			
RoboCent, Inc.		06 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 2129 General Booth Blvd	Δm	ount			
Ste 103-277				ount	
City	State	Zip Code		649.02	
Virgnia Beach	VA	23454		nsaction ID : SE.4299 e of Disbursement or Obligation	
Purpose of Expenditure Voter Telephone Contact		Category/ Type		06 06 2018	
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 02	
LURIA, ELAINE, , ,		X Oppose	l	sident Senate State: VA	
Calendar Year-To-Date			Disbursen	nent For: 🗶 Primary General	
Per Election for Office Sought	7-1-1-7-	1080.78	2018	Other (specify) ▶	
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination	
RoboCent, Ínc.				M M / D D / Y Y Y Y	
Mailing Address				06 06 2018	
2129 General Booth Blvd Ste 103-277				ount	
City	State	Zip Code	— F	2302.24	
Virgnia Beach	VA	23454		ansaction ID : SE.4302 e of Disbursement or Obligation	
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y	
Voter Telephone Contact		Type		06 06 2018	
Name of Federal Candidate:		Support	Office Sou	ught: 🗶 House District:02	
LURIA, ELAINE, , ,		x Oppose	Pres	sident Senate State: VA	
Calendar Year-To-Date		2202.02	Disbursen	nent For: 🗶 Primary General	
Per Election for Office Sought	7 7	3383.02	2018	Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			•	2951.26	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Marston, Chris, , ,	Electronically Fil	led1	M = M	/ D D / Y Y Y Y Y	
Signature	<u> гасы ониши</u> у Г Ш	_ Date	9 07	17 2018	

Signature

SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES	i		PAGE 14 OF 15			
NAME OF COMMITTEE (I. F. II)			FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full) STATE CONSERVATIVE REFORM ACTION PAC (SCRAP)						
STATE CONSERVATIVE REFORM A	ACTION PA	AC (SCRAP)	C C00566372			
Check if 24-hour report 48-hour report	New rep	ort Amends report	filed on M M / D D / Y Y Y Y Y			
Full Name of Payee RoboCent, Inc. Date of Public Distribution/Dissemination						
Mailing Address						
2129 General Booth Bivd	2129 Gerierai Bootif Bivo					
Ste 103-277	State	Zip Code	3390.20			
Virgnia Beach	VA	23454	Transaction ID : SE.4306 Date of Disbursement or Obligation			
Purpose of Expenditure Voter Telephone Contact (24-Hour Report estimate	d at 2,500)	Category/ Type	06 07 / 2018			
Name of Federal Candidate:		Support	Office Sought: House District: 02			
LURIA, ELAINE, , ,		Support Oppose	President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought	7 7		Disbursement For: ✓ Primary General Other (specify) ✓			
Full Name of Payee RoboCent, Inc.		☐ Memo Ita	Date of Public Distribution/Dissemination Date of Public Distribution/Dissemination 06 08 2018			
Mailing Address 2129 General Booth Blvd Ste 103-277			Amount			
City Virgnia Beach	State VA	Zip Code 23454	3448.92 Transaction ID : SE.4307 Date of Disbursement or Obligation			
Purpose of Expenditure Voter Telephone Contact (24-Hour Report Estimat	ed as 2,500)	Category/ Type	06 / 08 / 2018			
Name of Federal Candidate:		Support	Office Sought: M House District: 02			
LURIA, ELAINE, , ,		✗ Oppose	President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought	7 7	40000 44	Disbursement For: ✓ Primary General Other (specify) ✓			
(a) SUBTOTAL of Itemized Independent Expenditures						
(c) TOTAL Independent Expenditures			>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Marston, Chris, , ,	[Electronically Fi	<i>led]</i> Date	07 17 2018			

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

STATE CONSERVATIVE REFORM ACTION PAC (SCRAP)

	PAGE 1	
1	FOR LINE	24 OF FORM 3X
FEC I	DENTIFICA	TION NUMBER ▼
С	C0056637	72
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of Publi	ic Distribution	on/Dissemination
06	/ 11	2018
nt		
		2613.18
	ID: SE.431 ursement or	
06	/ D D D	2018
nt:	X House	District:02
ent	Senate	State: VA
nt For:	X Prima	ary General
Other (s	pecify) ▶	
		on/Dissemination
06	/ 11	2018
nt		
		1500.00
	ID : SE.431	
	ursement or	0
06	12	2018
nt:	X House	District:02
ent [Senate	State: VA
nt For:	✗ Prima	ary General
MI /-	pecify) ▶	
πer (s		
otner (s		4113.18
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				C C00566372		
Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y						
Full Name of Payee				Date of Public Distribution/Dissemination		
Mailing Address		06 11 2018				
2129 General Booth Blvd Ste 103-277				Amount		
City	State	Zip Code		2613.18		
Virgnia Beach	VA	23454		Transaction ID : SE.4311 Date of Disbursement or Obligation		
Purpose of Expenditure Voter Telephone Contact (24-Hour Report Estimated \$3,000)	d as	Category/ Type		06 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office	e Sought: X House District: 02		
LURIA, ELAINE, , ,		Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	12835.32	Disbu 2018	orsement For: ✓ Primary General Other (specify)		
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination		
Strategic Partners & Media, Inc				06 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1851A McGuckian St				Amount		
City	State	Zip Code		1500.00		
Annapolis	MD	21401		Transaction ID : SE.4312		
Purpose of Expenditure Digital Advertising (ESTIMATE)		Category/ Type		Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office	e Sought: K House District: 02		
LURIA, ELAINE, , ,		x Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	7 7	14335.32	Disbu 2018	orsement For: ✓ Primary General Other (specify) ✓		
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			•	13903.56		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Marston, Chris, , ,	Electronically Fil	[ed] Date	- M	7 17 2018		
Signature	-	_ Date				
				FEC Schedule E (Form 3X) Rev. 05/2016		